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KENT COUNTY COUNCIL

EDUCATION COMMITTEE

25 NOV 1963

REPORT ON THE HEALTH OF THE SCHOOL CHILD

For the Year 1962

A. ELLIOTT, M.D., D.P.H.

Principal School Medical Officer

LONDON SCHOOL OF HYGIENE AND TROPICAL MEDICINE
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Health Department,
County Hall,
Maidstone.

5th July, 1963.

To the Members of the Education Committee

During the year, 118,579 school children received a routine medical examination and 98.9% of them were found to be in a satisfactory physical condition. This finding indicates the high material level of living standards in the community and is an indication of the good standard of care and attention given by the great majority of parents to the welfare of their families.

Over the years the functions of the School Health Service have changed to meet changing social conditions and increasing attention is being given to the requirements of children presenting special needs. It is for this reason that the report gives details of the services for various classes of handicapped children.

During the year further attention was given to the need for publicising the effect of smoking, particularly of cigarettes, on health. In consultation with the Advisory Committee of Head Teachers, methods were devised to bring to the attention of children and their parents the overwhelming evidence of the link between smoking of cigarettes and the occurrence of lung cancer. A leaflet was prepared for issue to the parents of all children attending secondary schools in the County since it is clear that without the co-operation of parents, the efforts of teachers and members of the School Health Service cannot be effective.

The great majority of the activities of the School Dental Service must be devoted to the treatment of established dental disease and it must be a matter for concern that there is such a high occurrence of dental caries in young children. During the year the Ministry of Health published Memorandum No. 105 entitled "The Conduct of the Fluoridation Studies in the United Kingdom and the Results Achieved after Five Years". The addition of fluoride to water supplies naturally deficient in this substance is something that has now received full support and backing from the World Health Organisation, the Ministry of Health, the British Medical Association, the British Dental Association and the County Councils Association as a safe and effective public health measure that will be of material help and assistance in preventing dental ill-health in generations of children yet unborn. However, until fluoridation of water supplies is widely adopted in the United Kingdom, reliance must be placed upon a slow expansion of the existing dental services and on the greatest possible use of health education in dental hygiene.

During the year the first appointments were made of dental auxiliaries—the first to be recruited and who are members of a new group of staff in the health and welfare services. These auxiliaries have received special training in health education and those working in Kent show a real understanding and interest in this field.

I would wish to place on record my thanks to the staff for their services during the year and say again how much the effective functioning of the School Health Service derives from the harmonious association that exists with other members of the staff of the Council, particularly the teaching profession.

A. ELLIOTT,
Principal School Medical Officer.

REPORT OF THE PRINCIPAL SCHOOL MEDICAL OFFICER on the HEALTH of the SCHOOL CHILD for the Year Ended 31st December, 1962

GENERAL INFORMATION

Estimated population of the Administrative County at 30th June, 1962—1,695,560

Particulars of schools on 31st December, 1962

	No. of Schools or Departments	*No. of Pupils on the Roll*
Primary Schools	681	136,281
Secondary Modern Schools	145	71,179
Grammar Schools	38	23,155
Technical Schools	22	11,974
Nursery Schools	2	134
Special Schools—Day	6	556
Special Schools—Residential	7	593
		243,872

SCHOOL CLINICS

On 31st December, 1962, the Committee maintained the following number of Clinics:—

Minor Ailments	68
Dental	54
Dental (Mobile)	4
Ophthalmic	29
Speech Therapy	17
Child Guidance	5

STAFF ENGAGED IN THE SCHOOL HEALTH SERVICE AT THE END OF 1962

Central Office	Proportion of whole-time allotted to School Health Service
	%
Principal School Medical Officer:	
Elliott, A., M.D., D.P.H.	20.0
Deputy Principal School Medical Officer:	
Lyon, D. M., O.B.E., M.B., CH.B., D.P.H.	50.0
Senior Assistant County Medical Officers:	
Allen, L. M., M.B., B.CH., B.A.O., D.P.H.	10.0
Begg, R., M.B., CH.B., D.P.H.	20.0
Hazeldene, J. H., M.B., CH.B.	68.0
Ward, M. A. G., M.B., D.P.H.	7.0
Principal School Dental Officer:	
Millward, E., L.D.S.	75.0
Orthodontic Dental Surgeon:	
Barnett, J. D. W., DIP.ORTH., B.D.S.	100.0
Senior Speech Therapist:	
Miss J. Pollitt, F.C.S.T.	100.0
Excepted Districts	
MEDICAL OFFICERS OF HEALTH	
Beckenham Borough:	
Edwards, L. R. L., M.D., D.P.H.	36.0
Bexley:	
Landon, J., M.R.C.S., L.R.C.P., D.P.H.	25.0
Bromley:	
Carter-Locke, H. B. C., M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.	25.0
Kelynack, A. J. I., M.B., B.S., D.P.H. (Deputy M.O.H.)	50.0
Gillingham:	
Dunlop, M. L., M.B., B.CH., B.A.O., D.P.H.	25.0

Other Staff:	No. of Officers	Aggregate of time given to School Health Service in terms of whole-time officers
Assistant County Medical Officers	45	30.4
Dental Surgeons	30	29.2
Educational Psychologists	13	10.9
Psychiatric Social Workers	7	5.2
Psychotherapists	3	2.4
Speech Therapists	18	15.0
Dental Auxiliraies	4	4.0
Dental Surgery Assistants	46	46.0
Oral Hygienists	1	1.0
Health Visitors	261	65.2
Sessionally engaged (including staff employed by R.H.B.):		
Assistant County Medical Officers	10	2.6
Dental Surgeons	30	9.2
Dental Surgery Assistants	5	1.8
Ophthalmologists and Refractionists	20	4.2
Orthopaedic Surgeons	8	.4
Psychiatrists	6	3.6

The arrangement whereby four Assistant County Medical Officers attend a weekly or fortnightly session in the paediatric department of local hospitals as clinical assistants has continued. Six members of the medical staff attended refresher courses in paediatrics, and three a course organised by the Society of Medical Officers of Health on "Changing Concepts in the Field of Child Health".

Four members of the medical staff attended courses on the ascertainment of educationally sub-normal children. Five out of six of the whole-time medical staff are now qualified for the examination of educationally sub-normal pupils.

Approximately one-third of the Child Welfare Centres provided by the Health Committee are staffed by whole-time Medical Officers on the staff of the Education Committee; two whole-time Medical Officers give part-time assistance to the Mental Health Service and seventeen Medical Officers carry out routine examinations at Children's Homes for the Children's Committee.

The report of the Principal School Dental Officer on page 10 gives information about the staff of the School Dental Service.

MEDICAL INSPECTIONS

Arrangements have continued for pupils to be examined four times during their school life—on entry to school, at the age of 8 years, on admission to secondary schools, and before leaving school. Other examinations were made at various times in special cases.

The number of children examined during 1962 in the routine age groups was 118,579, which represents 48.5 per cent of the pupils on the school roll compared with 36.7 per cent for the previous year. In addition, 27,590 re-examinations of pupils found defective were carried out compared with 24,873 re-inspections in 1961.

Findings at Medical Inspections

Table II on pages 26 and 27 shows the principal defects found at medical inspections.

At the inspections of routine ages 19,974 children (16.8 per cent of the children examined) were found to have defects requiring medical treatment.

Classification of the Physical Condition

Two categories are provided for, i.e., "Satisfactory" and "Unsatisfactory". It will be seen from the figures given in table I (A) on page 23 that during 1962 only 1.1 per cent of the children examined in the routine age groups were considered to be "unsatisfactory".

Following Up

Where the parents attend at the routine medical inspection, advice is given and the nature of any defect is explained by the doctor. The health visitors visit the homes of children, where necessary, to ensure that the advice of the doctor is carried out.

MEDICAL TREATMENT

Table III on page 28 gives details of the amount of treatment given during the year.

(a) **Minor Ailments.**—The treatment of minor ailments is undertaken by the health visitors at the school clinics under the direction of a Medical Officer. During the year 5,879 defects received attention compared with 7,380 for the preceding year.

(b) **Cleanliness.**—The incidence of personal uncleanliness among school pupils remains low.

(c) **Eye Diseases, Defective Vision and Squint.**—The arrangements made for this work to be carried out under the interim arrangements suggested in Ministry of Education Administrative Memorandum No. 303 continue to work satisfactorily. Spectacles are supplied through the Supplementary Ophthalmic Services under the National Health Service Act.

The number of children examined by the Ophthalmologists was 20,160, the corresponding figure for the previous year being 21,858. Spectacles were prescribed for 8,405 children.

21 pupils reported by Assistant County Medical Officers to have a defect of colour vision when tested by the Ishihara colour vision plates were examined by the Ophthalmologists by means of a "lantern test" to obtain more exact information as to the degree of colour blindness, and 16 were found to have such a degree of defect as to render them unsuitable for future employment in occupations where a full range of colour vision is required.

(d) **Nose and Throat Defects.**—During the year the Assistant County Medical Officers found 1,255 children requiring treatment for nose or throat defects, and their recommendations were conveyed to the general practitioners concerned.

(e) **Orthopaedic and Crippling Defects.**—The orthopaedic scheme is administered by the County Health Committee. In 1962 there were 24,319 attendances at these clinics compared with 28,193 attendances during 1961. Of the former figure, 95.2 per cent were children in attendance at maintained schools.

The following table gives particulars of the number of new patients during the year and the total number of attendances:—

Clinic	*New Patients of School Age*	*Total Number of Attendances of Children of School Age*
Ashford	83	1,024
Beckenham	51	630
Bexleyheath	15	511
Bromley	86	1,294
Crayford	25*	246
Margate	50	5,222
Ramsgate	58	3,614
St. Pauls Cray...	—	36
Sevenoaks	9	1,191
Sittingbourne	16	403
Tenterden	27	513
Tunbridge Wells	19	1,285
Welling...	46	734
Laleham Special School, Margate	62	3,360
Valence Special School, Westerham ...	10	3,106
Totals	557	23,169

* Children are examined by the Orthopaedic Surgeon at West Hill Hospital, Dartford.

CHILD GUIDANCE SERVICE

Although no expansion of the service could be brought into operation during the year, premises were obtained for the establishment of a new clinic to be opened in Dover in 1963 and the Regional Hospital Board agreed to the appointment of an additional consultant psychiatrist to work in East Kent. The provision of additional accommodation in Thanet will make it possible to provide a more adequate and convenient service for the East Kent Area.

At the existing clinics the work of the service has continued on its established lines and it will be seen that there has been a small increase in the number of patients diagnosed and interviewed. This increase is probably associated with the development of the School Psychological Service which has brought the clinic staff, by virtue of the dual role of the educational psychologists, into closer contact with the schools. The psychiatrist at one clinic has also referred to a wider use of group therapy which was started as a means of attempting to reduce the long waiting list and which has shown itself in suitably selected cases to provide a satisfactory method of treatment.

Clinic	No. of pupils referred during 1962	No. of Patients Diagnosed	Total Number of Interviews	Number Discharged				
				Consultation only	Condition unchanged	Condition improved	Non-co-operative	Transferred to other Authority
Bexleyheath	202	146	3,016	81	—	11	7	6
Canterbury	262	203	3,477	35	4	65	21	7
Chatham	171	126	3,346	30	—	20	2	1
Chislehurst	83	45	1,329	22	4	20	4	4
Maidstone	387	327	5,376	203	—	81	20	18
Tunbridge Wells ..	178	169	1,465	144	1	18	2	6
Total..	1,283	1,016	18,009	515	9	215	56	42

Total attendances: 11,434

SCHOOL PSYCHOLOGICAL SERVICE

The County Education Officer reports:—

The Service has continued to develop during the year. It has been provided by thirteen educational psychologists based on six child guidance clinics with additional help from the educational psychologist of the City of Canterbury. The educational psychologists have divided their duties between the Child Guidance Service and the School Psychological Service.

The number of individual children in school seen by each educational psychologist averaged between 100 and 150, with follow-up work and visits. Probably about half the children were referred from junior schools or departments and most of the remainder were in secondary modern schools. Referrals for learning difficulties were rather more common than requests for the assessment of intelligence levels.

At the same time the educational psychologists have helped in other ways by:—

(a) lecturing to groups of teachers or of parents;

(b) assisting with area surveys of retardation as a basis for the consideration of remedial classes;

(c) advising on the selection of children for special classes;

(d) helping in the preparation of a new series of tests for the Kent Record Card;

(e) undertaking enquiries into specific teaching problems; and

(f) co-operating with Youth Employment Officers in providing vocational guidance in special cases.

The Kent School Psychological Service has continued to work as a team. The educational psychologists and the Chief Educational Psychologist meet once a term to discuss common problems. A successful week-end conference was held in May at Folkestone to which other psychologists from the Home Counties were invited to meet their Kent colleagues and a representative group of teachers, administrators, inspectors and others interested. Individual psychologists have the opportunity to specialise in certain detailed aspects of educational psychology so that in case of need the services of a specialist can be available anywhere in the County.

It is expected that head teachers will in the coming year make increased use of the School Psychological Service. There is no doubt that the kind of help offered by the Service and by the provision of classes for remedial work is much needed and that there is a steadily growing realisation of what it has to offer.

SPEECH THERAPY

Miss J. Pollitt, Senior Speech Therapist, reports:—

2,747 cases are under review in this annual report.

Cases dealt with in the clinics or through consultation with speech therapists elsewhere in the County	1,497	Discharged	638
		Continuing attendance at the clinics into 1963 ...	859
			1,497
Seen by speech therapists during their regular visits to Residential Schools and Special Classes for Educational Sub-normal Children	143		
Seen by speech therapist at Valence School for Physically Handicapped Children	18		
On the waiting lists at the clinics at the end of 1962	1,089		
	2,747		

The 638 cases were discharged for the following reasons:—

Satisfactory result following appointments, including those whose general condition was such as to prevent complete normality of speech	308
Little, if any, change following treatment	2
Treatment incomplete owing to family leaving the district or for other reason—in many cases considerable progress has been made	82
Treatment continued elsewhere; for example, the child with hearing loss transferred to a school for the deaf or partially hearing; the spastic child transferred to the school for physically handicapped, etc.	19
Consultation only, followed by appropriate recommendation	12
Found to have improved when first seen by speech therapist	41
Reported to have improved prior to appointments being offered or when appointments were offered	84
Investigation incomplete—left district or proved unco-operative or investigation incomplete for other reason	12
Appointments offered but never kept; no reason given or circumstances made attendance impossible	34
Treatment arranged elsewhere prior to appointments being offered	15
Left school or district prior to appointments being offered	28
No speech defect but treatment given to correct tongue thrusting	1
	638

The total figure includes 41 adults sent by the South-East Metropolitan Regional Hospital Board, of whom 8 were discharged during the year, 29 will continue attendance at the clinics in 1963, and 5 were on the waiting lists at the end of 1962.

Four speech therapists holding full-time appointments and one holding a part-time appointment resigned during the year. These changes in staff affected the work in the Gillingham, Beckenham and Bromley clinics and the work in the special schools and recognised special classes for Educationally Sub-Normal Children. The time lag between the work in a clinic or special school ceasing and being resumed varied between two to eight months. It was, however, possible during the year to fill all vacancies and to increase the part-time staff by two. The year ended with a full establishment of 14 full-time and 4 part-time speech therapists. The 4 part-time staff had each previously held full-time appointments under the Authority.

Students from the West End Hospital Speech Therapy Training School have continued to receive practical experience and training at the Barnehurst and Sidcup clinics.

Lectures were given to speech therapy students, house parents and health visitors in training; speech therapists also spoke at courses organised by teachers' organisations, and by the Chartered Society of Physiotherapists; and at a career convention. Visitors to the clinics included general practitioners, health visitors, speech therapy students, student nurses and midwives, students preparing theses on aspects of the Health Services and school-leavers considering taking up speech therapy as a career.

A close liaison was maintained between teachers and other staff of the County's Education and Health departments. Speech therapists visited schools and teachers visited the clinics. There were case discussions with Assistant County Medical Officers as well as with other staff appointed to school clinics. The staff of the School Psychological Service worked in close co-operation with speech therapists in certain cases. The staff of training centres were able to receive advice about the articulation and language development of children in their care, as were home teachers working within the Education and Mental Health Services.

Consultation with various consultants in the hospital services is an integral part of the work being undertaken; consultants send patients to the clinics and speech therapists are able to recommend appointments with consultants in hospitals and also, on occasion, to have case discussions with them. The seconding of speech therapists to work for one session per week in hospitals continued at West Hill Hospital, Dartford, The Kent and Canterbury Hospital, Canterbury, The Orpington Hospital, and at the General Hospital, Margate.

The following is a list of the clinics, the number of sessions held and the waiting lists at each clinic at the end of 1962:—

Clinic	*Session*	*Number on Waiting List at end of December*, 1962
Ashford	8	91
Barnehurst	12	169
Beckenham	10	54
Bexley, Murchison Avenue	4	18
Bromley	18	47
Canterbury	9	58

Clinic	*Session*	*Number on Waiting List at end of December*, 1962
Chatham	6	57
Chislehurst	2	47
Deal...	6	21
Folkestone	10	64
Gillingham	14	34
Gravesend	2	93
Maidstone	10	89
Margate	9	70
Sevenoaks	2	41
Sidcup	10	74
Tunbridge Wells	6	62

DENTAL SERVICES

Mr. E. Millward, Principal School Dental Officer, reports:—

The year again saw some small improvement in the staffing position. During the year four new whole-time officers were recruited, but this was partially offset by one retirement and one resignation. The number of part-time officers remained steady, though there were some changes in personnel. The staffing position as at 31.12.62 was 28 whole-time officers, including 1 whole-time orthodontic specialist, and 33 part-time officers, this representing in total the equivalent of 39.4 whole-time officers. Comparative figures for 1961 were 26 whole-time officers, 32 part-time officers, total equivalent 36.5 officers. The Principal School Dental Officer is not included in these figures.

Whilst this continued improvement in the staffing position meant that authority had to be sought to increase the permitted establishment, which stood at 40 officers plus 1 Principal School Dental Officer, the position is still far from satisfactory. Many of the officers, particularly those engaged on a whole-time basis, are in the higher age group and it will be necessary to continue to make every effort to maintain recruitment. Some extra assistance was provided by the arrival in September of 4 dental auxiliaries to whom reference was made in my report for 1961, but even so it was only possible to examine and offer treatment where needed, to approximately two-thirds of the children attending school in the county. It is widely and correctly accepted that the rapid onset of dental caries in young people necessitates dental inspections at least twice each year.

There was a reduction in the number of sessions devoted to the Health Committee services for the Care of Mothers and Young Children, this year some 460 sessions being devoted to this work, the equivalent of 1 whole-time officer. This reduction is due to the decline in ante-natal clinic attendances. The ratio of children to each Dental Officer was again reduced from 6,675 at the end of 1961 to 6,490 at the end of 1962, and the number of children who received a routine dental inspection in school increased from 142,640 in 1961 to 155,962 in 1962. In addition to this 9,540 special applications for dental treatment were received, so that in the year 68% of the children were inspected, which again shows an improvement over the figure for 1961 (62%), but which is still not satisfactory. The number of sessions lost through illness fell from 858 to 683, and these are mainly attributable to two dental officers who had the misfortune to have long illnesses.

The remainder of the dental staff consists of 1 hygienist, 46 whole-time surgery assistants, 5 part-time surgery assistants, 1 chief technician, 5 senior technicians, 1 technician and 1 whole-time clerk employed at the laboratory in Maidstone. Assistance is still being received from Assistant County Medical Officers and other medical practitioners in the administration of general anaesthetics, of which 9,394 were given. This shows a slight reduction, as do the number of teeth extracted, but it is good to see that the number of teeth being conserved, both temporary and permanent, shows a considerable increase. This is as it should be, the primary aim of the service being to ensure that the children leave school with a full complement of teeth in good condition. It is still a cause of concern that there is so much dental decay amongst children of school age, and far too many permenent teeth still have to be extracted before the child leaves school, though many of these extractions are carried out for orthodontic purposes to relieve overcrowding.

The orthodontic services continued under the direction of Mr. J. W. D. Barnett, D.O., B.D.S., and whilst the figure of appliances constructed shows a slight fall, it should be realised that more complicated and advanced techniques were often employed, calling for a far greater degree of skill both from orthodontist and technician. One appliance often does the work where two were needed previously, but these appliances take more time to produce in the laboratory. The requests for assistance with orthodontic cases from dental officers, private practitioners and parents continued to increase, so that whilst Mr. Barnett was very fully occupied all the year, and despite the aid given by the Principal School Dental Officer, who again took over the direction of the orthodontic services in a number of clinics, the demand for these services was so great that there is a long list of children waiting to be seen, and it will be necessary to obtain the services of a second orthodontist if we are to provide an adequate service to all who need it.

Details of orthodontic appliances made during the year in the Council's laboratories, compared with the figures for 1961, are:—

	Removable appliances	*Fixed appliances*	*Repairs*
1962	1,077	89	167
1961	1,291	30	218

Additionally, the laboratories carried out the following work:—

	Dentures	*Repairs*	*Crowns, Bridges, Inlays, etc.*
1962	349	56	37
1961	388	66	28

One new clinic was opened during the year and very considerable progress was made in bringing the other clinics up to date with the most modern equipment. Four new surgeries were opened for the dental auxiliaries, these being in existing clinics at Maidstone, Ashford, Sittingbourne and Sheerness.

The programme of equipping surgeries with air turbine drills and of providing X-ray facilities also continued, and great appreciation has been expressed by staff and patients of these facilities. The X-ray machines are proving extremely valuable in conjunction with the orthodontic services and also with the more advanced conservative techniques being carried out by some of the dental officers. It is hoped to continue the programme in 1963.

During the year the Report on the Government's "Five year study on the effect of adding fluoride to the water supply in selected areas" was published. The report gives details of the reduction in the incidence of dental decay observed in those areas where fluoride was added to the drinking water in the concentration of one part per million. In children who had had water containing fluoride at this concentration all their life a reduction of over 50% in the incidence of dental decay was noted in all the trial areas compared with the incidence in children of a similar age in the control areas. These figures agree with those obtained in other countries where similar trials were carried out, and indeed the reduction in caries incidence makes it the same as occurs in areas where fluoride is naturally present in the water supplies at a similar concentration. The report comes to four conclusions, namely:—

1. Five years of fluoridation at a level of 1 p.p.m. in three study areas has brought about in each a substantial improvement in the teeth of young children.
2. The results of fluoridation obtained so far are in line with American experience.
3. No evidence of harm from fluoridation has been discerned despite constant vigilance.
4. The addition of fluoride to water supplies at a specified level has presented no technical difficulties.

Subsequently the Minister of Health asked local health authorities to consider taking action under Section 28 of the National Health Service Act to add fluoride to the extent of one part per million to those water supplies where such a level did not occur naturally. Whilst it would be a number of years before the full benefit of these arrangements become evident, they are very necessary to reduce the large amount of dental decay to be seen in the average young person's mouth. However, it must be realised that fluoridation will only reduce, not banish completely, dental decay, so that it will still be necessary to carry out regular dental inspections and the care exercised by the patients and by their parents must be maintained. Many reports are still received from dental officers and others of parents who refuse treatment from the school dental officer, saying that they will take their children to a private practitioner but who never do this. Consequently the child is seen at a later date still having many carious teeth present, some in need of extraction which could have been saved had treatment been accepted or otherwise obtained when its need was first observed and notified.

It is early yet to assess the value of the dental auxiliaries. They assumed their appointments towards the end of September, and as with all new schemes, some time will be necessary to iron out initial difficulties. However, they are, without doubt, giving valuable aid in the training of young children in the acceptance of dental treatment, and also in carrying out fillings for these very young and for older children.

HANDICAPPED PUPILS

Table V on page 30 gives details of handicapped pupils requiring education at special schools or boarding in boarding homes. The following information supplements that given in the table:—

Deaf and Partially Hearing Children

Children whose hearing requires further investigation in relation to the possible need for special educational treatment, especially where poor intelligence may also be a relevant factor, are sent to the nearest hospital where specialist advice is available.

Gillingham Partially Hearing Unit

Dr. M. L. Dunlop reports:—

All the children attending the Unit for Partially Hearing pupils at Woodlands Road County Primary School have been examined during the year, and their progress discussed with the parents and the teacher in charge of the unit.

Close liaison has been established with the Audiology Unit at Gray's Inn Road where many of the children attend regularly for review and hearing aid replacements and alterations, and in most cases for psychological assessment. Dr. Fisch attended one of the evening parent-teacher meetings and gave a talk on the causes of deafness in children.

During the year a closer connection with the Audiology Unit of the Ear, Nose and Throat Department at Maidstone Hospital has been arranged and children can now be referred direct to the audiometrician for hearing-aid adjustments and repair.

The Partially Hearing Unit had increased in number to 22 and a second unit was opened in February, 1962, at Fair View County Primary Junior Mixed School, to which seven of the older children were transferred. Medical examination and parent-teacher discussions have been carried out there also during the latter part of the year.

Home visits by the teacher are paid in all cases to help the parents in the training of their partially hearing children.

In a few cases where the deafness was considered to be too profound for the children to be suitably taught in a partially hearing unit, admission to a school for the deaf was necessary; the parents of these children keep in close touch with the unit and report that good progress has been made and they have settled well in their residential school.

In November Dr. Huss and Dr. Simpson of the Ministry of Education visited the units and were particularly interested in the children's speech development.

Dartford Partially Hearing Unit

A group of fourteen partially hearing children attend two classes attached to the St. Alban's County Primary School, Dartford.

Four of the teachers at these two units hold the Manchester University qualification for teachers of the deaf. Two teachers from the Gillingham Partially Hearing Unit are also employed as peripatetic teachers.

Arrangements continue for children to attend lip-reading classes organised by the Canterbury Education Authority, where instruction is given by a member of the staff of the Margate Royal School for Deaf Children.

Physically Handicapped

Details given in Section E of Table V include the following units:—

The Phoenix Centre for Spastics, Farnborough Hospital. This unit has 15 children of junior age who attend daily.

Joyce Green Hospital, Dartford. Special provision is made for a group of children suffering from muscular dystrophy who are taught together. Ten children of school age are included in the tuition which is under the supervision of the Head Teacher of the Bow Arrow Hospital Special School.

Gillingham

Dr. M. L. Dunlop reports:—

In September, 1961, an experimental unit for physically handicapped children between the ages of 5 and 7 years was established at Richmond Road County Primary School. Ten children who would not have been able to attend normal school, and were too young for residential schooling and would therefore have had home tuition in the past, were admitted under the care of an infant teacher and welfare assistant. In January, 1963, there were 12 children in attendance.

The children's disabilities were all of a degree which would preclude their mixing in even a small group of normal children—three were unable to walk or stand alone, two spastics and one hydrocephalic; two had congenital hearts, and two were severe achondroplasiacs. Most of the children are of normal intelligence though one high grade mongol, with associated physical disabilities, but able to read and write at six years old was admitted for trial period.

All the children settled well and quickly formed a happy group. The parents were most helpful and have given the unit active support and encouragement, and all have been delighted with their children's physical progress. Although no special physiotherapy could be arranged, by the end of a year the children were all mobile (one with the aid of a walking frame) and participating in normal class activities for their age.

In all cases medical histories and detailed case notes and progress notes have been compiled so that their medical as well as educational progress may be assessed at the end of a further year; all the children are seen at least once a term, and more often if necessary.

Educationally Subnormal

The following information concerning educationally subnormal pupils supplements that given in Table V:—

Attending special schools or suitable independent schools	1,031
Receiving tuition at home or in special groups	34
Awaiting admission to special schools	496
Attending ordinary schools, other than those awaiting admission to special schools	968
Total number of educationally subnormal pupils	2,529

Maladjusted

The 45 maladjusted children included in Section E (ii) of Table V are provided for as follows:—

Southdowns Reception Centre, Doddington, is maintained by the Children's Committee and the children normally in attendance there are those who have recently been taken into care; they remain at Southdowns for 4 to 6 weeks pending permanent placing. The number of children receiving education in January, 1963, was 23.

Park House Reception Centre, Southborough, is a similar establishment to the Southdowns Centre which also caters for the more difficult children who are received into care. The number of children receiving education in January, 1963, was 22.

Special Schools

Broomhill Bank School, Tunbridge Wells (for Educationally Subnormal Girls)

Dr. K. M. Gower Isaac reports:—

During the year ending December, 1962, there were 111 girls on the school roll, 8 of the new admissions being from Furness Special School.

The general health of the pupils was good. There were two small epidemics of infectious disease: 10 cases of chicken pox and 33 cases of rubella. Any girl suspected of diminished hearing received an audiometer test, and it is hoped to ensure that all girls in the school receive one audiometer test during their school life; the great majority tested showed no significant defect.

Twenty-two girls left school, 16 of these having passed their sixteenth birthday. Seven girls were transferred to training centres for the mentally subnormal. Seven are known to have obtained employment. Two girls were excluded as unsuitable for education. One was transferred to hospital for psychiatric treatment. A number of the girls who were transferred on leaving to training centres were admitted on trial only, as they were on the border-line of educability.

Halstead Place School (for Educationally Subnormal Boys)

Dr. F. W. Fox reports:—

There were 114 boys in the school at the end of the year, 33 having been admitted and 35 having left during 1962. Seven boys left before reaching the age of 16; 1 was transferred to a day special school for educationally subnormal pupils, one was admitted to the Lingfield Hospital School for epileptics, 1 left against the advice of the Headmaster and 4 were found to be unsuitable for education in school. The Intelligence Quotients of the 28 boys who completed the school course varied between 49 and 86, the average being 63. Seventeen leavers were recommended for supervision, and 25 obtained remunerative employment.

Fifteen boys were in the care of the Children's Committee.

During the Spring Term 22 boys were admitted to the Sick Bay with rubella. The incidence of illness and defects remains much the same as in previous years. Ten boys were persistent and 7 occasional enuretics. Twenty-six had errors of refraction and glasses were prescribed for 24.

Out of school activities continue as reported in previous years and the construction of an open-air swimming bath will add considerably to the amenities provided.

H.M. Inspectors carried out a full inspection in November and their report and recommendations are awaited.

Seabrook Lodge School, Hythe (for Educationally Subnormal Boys)

Dr. D. J. Gilbert reports:—

The number of boys in this boarding school has remained at 96.

The standard of physical fitness has remained high, no serious illness having occurred, and all the boys were given a routine medical inspection during the year.

The Staff have had to work under difficulty during the rewiring of the school, but now this is completed the school in its beautiful buildings and ideal surroundings continues to give a fine service to those educationally subnormal boys who are fortunate enough to find a place in it.

Furness Special School, Hextable (for Educationally Subnormal Pupils)

Dr. H. M. Denholm-Young reports:—

This school accommodates 24 boys and 24 girls aged 7 to 11, but extensions have commenced and, when complete, 80-100 children will be accommodated.

During 1962 there were 5 boys admitted and 5 left (4 to Halstead Place School and 1 to a secondary modern school), 9 girls were admitted and 8 left (all to Broomhill Bank School). All children have been tested by audiometer. Every child had an intelligence test in 1962, the highest being 101, and she now attends an ordinary day school; the lowest was 51. Medical inspections and immunisations were done. Six had tonsils and/or adenoids out.

St. Nicholas School, Beckenham (Day School for Educationally Subnormal Pupils)

Dr. L. R. L. Edwards reports:—

No. of children on Roll, December, 1962	89	Boys 50 Girls 39	Age range 7–16 years
No. of children who left school during 1962...		25	
Left school on attaining the age of 16 years		17	
Transferred to Boarding School for E.S.N. Pupils ...		3	
Decision recorded under Section 57 (4) of the Education Act, 1944		1	
Excluded from school		1	
Removed from district		3	

Of the 17 children who left school on attaining the age of 16 years:—

Transferred to Training Centre			1
Transferred to Psychiatric Hospital Unit			1
Placed in jobs but not now working			1
Not at present working			3
Placed in suitable employment			11
in the following occupations:—			
Garden Boy	1	Shop Assistant	1
Messenger	1	Trainee Machinist ...	1
Lampshade Worker ...	1	Packer—Supermarket ...	1
Apprentice Carpenter ...	1	Factory Hand	1
Van Boy...	1	Laundry Worker ...	2
Number of decisions recorded under Section 57 (4) of the Education Act, 1944...			1
Number informally notified to L.H.A. as needing supervision on leaving school			13
Number of pupils admitted to school during 1962			19
From: (1) Beckenham			4
(2) Bromley			10
(3) Chislehurst			1
(4) Penge			4

Ninety-one children were medically examined and 82 children were dentally examined during the year. Parents were present at 32 of the medical examinations.

No. of children found to require dental treatment	43
No. of children receiving treatment for eye defects	31
No. of children receiving treatment for orthopaedic defects ...	3

A scheme has been inaugurated to enable the class teacher, under the supervision of the speech therapist, to give special help to children handicapped with speech defects. The speech therapist tries, whenever possible, to relate articulation and language training with the reading scheme which is employed throughout the school, and which was introduced by the Headmaster in 1960. The speech therapist sees each child, when necessary, with the class teacher.

In future routine nine year old audiometer tests will be discontinued, and all children entering the school will be tested with a pure-tone audiometer shortly after admission if this has not already been carried out.

Five children were given a pure-tone test. Four were found to have normal hearing; 1 child was found to be deaf in one ear and referred to his own doctor.

One child, with parental consent, received a Mantoux Test, was found to be negative and received B.C.G. vaccination.

Children attend Hawes Down Clinic when necessary for special medical examinations, and intelligence testing is carried out at school, at this clinic or at the Town Hall Clinic.

Danecourt School, Gillingham (Day School for Educationally Subnormal pupils)

Dr. M. L. Dunlop reports:—

During 1962 all the children at Danecourt Special School were seen and examined by the school medical officer who attended for one session a week throughout the year.

Special examinations were arranged during these sessions for children about whom the Headmaster had particular problems with regard to either their medical histories, as in the case of those with dual handicaps, or their developmental or scholastic progress. In these cases review intelligence tests were performed and the children's problems discussed with the Educational Psychologist who also attends the school regularly. Some of these children were referred for consultant opinion to hospitals, and some to the Child Guidance Clinic for more detailed investigation and advice.

In all cases the medical files have been brought up to date by reports of the children's previous treatment from hospitals and general practitioners and this has been especially valuable for those with dual handicaps, and it has been necessary to send most of these children for further treatment or for the provision of, or alteration to aids, such as hearing aids and surgical footwear.

In almost all cases the parents of the children have attended to discuss their medical and school progress and the parents interest and enthusiasm for the school is most encouraging.

All new entrants are selected by a panel representing the head teachers of Gillingham and the Medway Area, the Headmaster, Education Officer, School Medical Officer and the Head of the school for each child being considered—it may be as many as 40-50, only 4 or 5 of whom can be admitted in any one term. This situation was eased considerably in September, 1962, by the opening of two special classes for educationally subnormal children between 7 and 11 years of age at Glencoe Road School, Chatham, so that by the end of the year arrangements had been made for almost all the children with an I.Q. less than 65 and of suitable age to be admitted to Danecourt or Glencoe. There still remains a number of children whose I.Q. is 65-75 who would benefit by special education but must remain in the secondary schools until more special school places are available.

At the lower end of the I.Q. scale a few children were admitted for a trial period both from primary schools and from training centres and their progress will be assessed at the end of a year.

A small number of children (4) who had been in the school since it opened in 1959, on reassessment following failure to make any progress in school work were found to be unsuitable for education and are now attending the Strood Training Centre.

All school-leavers are seen in their last term and their future employment discussed with the parents, the Headmaster and the Youth Employment Officer. Only 2 of the 12 school-leavers during the year were found to be unemployable and in both cases their additional physical handicap (e.g., epilepsy) was the determining factor.

The children attend the dental and ophthalmic clinics regularly and dental inspections are carried out in the school as necessary.

The school nurse visits periodically to examine the children for cleanliness and to exclude any found to be verminous. In spite of repeated treatment and advice there remain one or two persistently dirty families who are a source of infestation and frequent home visits are necessary in these cases.

During the autumn term the chiropodist has attended to give advice and treatment to those children in need and it is hoped that it may be possible to secure the services of a part-time physiotherapist shortly to give treatment to the most severely handicapped and advice to the teaching staff on the postural and deportment problems of educationally subnormal children.

The Ministry of Education Inspectors visited the school in October and we were pleased to welcome Dr. Huss and discuss with him the arrangements for the medical care of the children at Danecourt and the close co-operation and help which we receive from Mr. Jones and his staff.

The school has now been open for three full years and is already recognised locally as a powerful force in the range of education provided in the area, and as a kind, sympathetic and understanding second home for the educationally subnormal children of the Medway towns and certainly the happiest of schools in which the medical officer works.

St. Anthony's School, Margate

Dr. M. Cagney reports:—

This day school for educationally subnormal pupils for the Thanet area is now in its fourth year. The number of children recognised as needing special educational care has grown considerably and the roll has now increased to 110 pupils. This is made possible by 13 pupils using a classroom in a neighbouring infant primary school.

During the year 6 children aged 16 left school and 5 of these obtained good jobs in local factories and restaurants, but 1 boy, physically as well as mentally handicapped, was unable to find work. It is with regret that I have also to report that one boy was admitted to hospital with Hodgkins Disease and died soon afterwards.

The general health of the school has been good throughout the year and a high standard of cleanliness has been maintained, although some of the pupils come from poor and neglected homes. This improvement is mainly due to the excellent work of the full-time welfare assistant who has been with the school since its opening.

Routine medical examinations were carried out throughout the whole school and the I.Q.'s of all leavers were reassessed before their interviews with the Youth Employment Officer. The school had regular visits from the Speech Therapist during the year to advise on the treatment of speech problems and 15 pupils received regular speech therapy. The Physiotherapist also attended weekly and remedial exercises for simple postural and foot defects were arranged in the school.

The average I.Q. of pupils attending St. Anthony's is approximately 70, the lowest is 51 and the highest is 85. The average size of classes is from 12 to 14 pupils, so that each child receives adequate encouragement and help. The school curriculum is varied but emphasis is naturally laid upon the basic subjects of education and the more practical subjects.

All children in their last year at school are able to travel on public transport, and are taught practical necessities such as using a telephone, mending a fuse, and, if girls, cooking a meal. Other activities where some recognition has been gained include the efforts of 12 pupils who gained the silver

medallion of the International Society of Teachers of Dancing, and 30 pupils who won the bronze medal.

In conclusion I would write that St. Anthony's is providing a very successful answer to the problems presented by the educationally subnormal pupil.

Grovelands Day Special School, St. Paul's Cray (for Educationally Subnormal Pupils)

Dr. J. Nithsdale reports:—

This year has been one of consolidation and reassessment. There are now 107 children on the roll, an intake of 42, and the staff now consist of Headmaster and 9 teachers, 2 of whom are specialists. The range of intelligence quotients is 44-88, some of the latter being under continued review, but the majority are in the 60's. A considerable amount of retesting has been carried out, as a result of which four children were returned to County Secondary schools, 5 recommended for training centres for the mentally subnormal, 2 transferred to residential schools for educationally subnormal pupils, and 2 to special schools in other areas. There are still some children for whom other recommendations have been made without effect so far, due no doubt to the difficulty in finding places in suitable schools.

It is a rewarding experience to see the school settling down and progressing.

Bower Grove School, Maidstone

Dr. E. C. Whyte reports:—

Bower Grove School for educationally subnormal children opened in its well equipped new building in May, 1962, with 77 children on the roll; this, it is hoped, will increase to 113 in the next two years. There are at present 6 classes, and the staff consists of the Headmaster and 8 teachers. In addition there are 2 Welfare Assistants and a Clerical Assistant.

Transport is provided for nearly all the children and some travel long distances. Everyone settled down happily and their health was good. There was a mild epidemic of rubella and a few cases of diarrhoea and vomiting.

Great emphasis is placed on social training and on personal cleanliness and neatness of clothes. Showers are supervised by the Welfare Assistants.

There are many out-of-school activities and some of the older children have been youth hostelling at the week-ends. Next term the roll will be up to 83. Three children have left, 1 to a residential school, 1 to a Secondary Modern school and 1 has left the district.

Laleham School, Margate (for Delicate Pupils)

Dr. M. Cagney reports:—

The number of children admitted to Laleham School throughout the year remained almost constant with 51 boys and 52 girls in the Spring term, 50 boys and 51 girls in the Summer and 51 boys and 52 girls in the Aurumn term.

The conditions which necessitated their admission to the school are shown in the following table:—

	Spring	*Summer*	*Autumn*
Respiratory infections, chronic and recurrent	14	16	19
Asthma	58	52	61
Eczema	12	14	15
General debility and subnormal nutrition	16	22	24
Psychological instability	13	14	9
Unsatisfactory home conditions ...	29	31	26
Miscellaneous, e.g., obesity, chorea ...	14	12	11

On the average each term 10 children suffered from nocturnal enuresis of whom 6 were persistent in the Spring, 1 in the Summer and 3 in the Autumn terms. Mowrer appratus technique was used in 2 cases without any noticeable improvement.

Every child at the school was medically inspected each month during the term and following this 23 children were referred to Mr. Wright, the Orthopaedic Surgeon. On the average each term 50 children were given remedial postural and breathing exercises by the Physiotherapist who visits the school weekly.

Mr. Moore, the Ophthalmologist, also visited the school and saw 9 pupils in the Spring, 2 in the Summer and 4 in the Autumn terms.

The following table shows the average gain in height and weight each term.

	Spring Term		*Summer Term*		*Autumn Term*	
	Boys	Girls	Boys	Girls	Boys	Girls
Height gain (ins.) ...	0.56	0.2	0.53	0.5	0.6	0.5
Weight gain (lbs.) ...	3.5	3.4	2.2	3.5	3.4	5.3

Tuberculin tests were carried out on 32 pupils; 5 pupils received smallpox vaccinations and 2 pupils polio vaccinations.

Gap House School, Broadstairs (for Delicate Pupils)

Dr. M. Cagney reports:—

The number of pupils admitted to the Junior Department of the Open Air School at Broadstairs is as follows:—

	Boys	*Girls*
Spring Term	18	9
Summer Term	20	11
Autumn Term	18	9

The conditions for which they were admitted are shown in the following table:—

Diagnosis	*Spring*	*Summer*	*Autumn*
Recurrent bronchitis and upper respiratory infection	3	4	5
Asthma	14	18	16
Eczema	6	6	8
General debility...	3	1	1
Psychological instability	1	0	1
Unsatisfactory home background ...	11	9	5
Miscellaneous	0	0	1

During the year there were 2 very resistant cases of enuresis and between 4 and 6 children were occasionally so.

Routine medical examinations were carried out each month and as usual children found to have specific defects which might require treatment were referred for a specialist's oppinion.

These were as follows:—

(a) orthopaedic
Two new children were referred and there were 6 children referred as re-examinations in the Spring and Autumn terms and 5 in the Summer term.

(b) Ophthalmic, including orthoptic
Four children were referred to Mr. Moore in the Spring, 3 in the Summer and 6 in the Autumn terms.

(c) Dental treatment
Seven children attended Broadstairs clinic for extractions.

On the whole, there was little intercurrent illness during the year but 6 children developed rubella and 1 fairly severe bronchitis. One boy was admitted to Ramsgate General Hospital for removal of tonsils and adenoids.

Improvement in the physique of the children is shown by the following table of average gains in height and weight during the year:—

	Spring		*Summer*		*Autumn*	
	Boys	Girls	Boys	Girls	Boys	Girls
Average height gain (ins.) ...	.55	.45	.5	.7	1.09	1.18
Average weight gain /lbs.) ...	2.46	2.4	3.57	4.3	3.86	3.58

Rusthall (Day) Open Air School, Tunbridge Wells

Dr. H. D. Fox reports:—

During the year 76 children attended the school. There were 24 admissions and 12 discharges. In the latter group 3 children were transferred to County Primary and Secondary schools, 2 to Halstead Place School for educationally subnormal pupils, 1 to Lingfield Hospital School, 1 child proved to be unsuitable for education in school and is being transferred to a training centre, 3 children moved out of the area, and 2 boys left school on attaining the age of 16 years and are both in regular employment.

TABLE OF AGE GROUPS

5–7 years	30
8–11 years	28
Over 11 years	18

CLASSIFICATION OF DEFECTS

Delicate	28
Congenital Heart Disease	7
Lung Diseases—Asthma	1
Other	2
Orthopaedic	5
Neurological—Epilepsy	3
Paresis	5
Educationally subnormal...	10
Developmental	1
Obesity	1
Dermatological	3
Maladjusted	3
Hearing Defect	2
Speech Defect	5

Table of Intelligence Quotient Range

Sixty-four children were given individual intelligence tests, of whom 41 were tested by Medical Officers.

I.Q.	
120 and over	2
119–110	5
109–100	4
99–90	10
89–80	16
79–70	8
69–60	12
Below 60	7

Each child has been medically examined at least once per term and any defects discovered have been treated. The general health of the children has been good and there have been no infectious epidemics.

Many children continue to benefit by individual and class therapy given by the visiting Physiotherapist.

Since September, 1962, a very satisfactory arrangement has been made whereby some senior boys have attended woodwork classes, and some senior girls domestic science classes at nearby Secondary Modern schools, thus deriving educational and social benefits.

Valence School for Physically Handicapped Children, Westerham

Dr. G. Stableforth reports:—

The number of children on the school roll at the end of the year	82
Admissions during the year	20
Leavers during the year, including those who did not return after the Christmas vacation of 1961	12

Classification of Defects from which the Children Suffered

(1)	Neurological	
	(a) Cerebral palsies	40
	(b) Spinal cord lesions	2
	(c) Sequelae of anterior poliomyelitis	19
	(d) Heredo-familial ataxia	1
	(e) Epilepsy (symptomatic)	12
	(f) Hydrocephalus with associated paresis	2
	(g) Paresis following head injuries	2
	(h) Paresis following tuberculous meningitis	1
(2)	Heart Diseases— Congenital 5, Acquired 1	6
(3)	Muscle diseases	2
(4)	Blood diseases	4
(5)	Respiratory diseases	5
(6)	Diseases and deformities of bones and joints	19
(7)	Internal congenital malformations	2
(8)	Defective hearing associated with other diseases	7
(9)	Ophthalmic defects and diseases including strabismus	33
(10)	Speech defects	15
(11)	Skin defects	1

Epilepsy

Of the 12 children suffering from epilepsy, 2 are off medication, now having been free from attacks for several years. One child had severe epileptic fits during her holidays which necessitated her admission to hospital on two occasions, once in December, 1960, and again in the Summer 1962. When in school she did not have any severe or frequent attacks; she was withdrawn from school by her parents.

One boy and 1 girl are having hospital investigations at the present time. The girl developed more frequent attacks; she is 15 years of age. Similar cases have been reported in association with puberty; so far no definite explanation has been given. The same girl has suffered a loss in weight and there has been a marked deterioration in her I.Q. and in her school work; nothing abnormal has been found to account for her loss in weight at the present time; whether the drop in her I.Q. is a temporary feature or whether there may be more brain damage is not known yet; she suffers from a neurolgical disorder.

Defective Hearing

Four of the children suffering from defective hearing have been provided with hearing aids of the new transistor type. In the 7 cases reported as having defective hearing, the associated disabilities were cerebral palsy (athetosis, and athetosis with spasticity) and congenital anomalies.

The majority of children in the school have had an audiometric test; a few admitted during the Christmas term have, so far, had voiced tests only.

Ophthalmic Defects and Diseases

Of the 33 children named in this section, 22 have been provided with glasses, 7 were said either not to require them, or were able to discard their glasses; 10 children suffered from strabismus; 6 children had nystagmus; 1 child had had an eye removed by operation before entering the school; 1 girl who suffered a loss of vision in both eyes last year has recovered a considerable amount of vision now—she had to wear glasses *prior* to this acute attack of neuritis and continues to wear glasses.

Table of Intelligence Quotients

(1)	110–130	11
(2)	90–109	20
(3)	80–89	16
(4)	70–79	16
(5)	60–69	18
(6)	Below 60	4

In the top range, 110-130, 7 children had disabilities resulting from anterior poilomyelitis, 2 had spinal cord lesions, 1 had a muscle disorder, 1 suffered from an internal malformation. In the lowest range were children also suffering from neurological disorders, of whom 3 had additional symptomatic epilepsy.

Admissions to Sick Bay

There were 3 cases of chicken-pox; 39 cases of influenza; 22 cases of rubella; 4 cases of otitis media. Apart from minor accidents in the year, 2 children had to be admitted to sick bay for observation as they had sustained head and facial injuries; one, a girl suffering from cerebral palsy, was X-rayed following her accident. No fracture was discovered, but she was admitted to hospital for observation; the other case, a boy suffering from a blood disorder, injured his face and it was considered advisable to admit him to sick bay. Both children made good recoveries.

The Number of Children Admitted to Hospital

(1)	Orthopaedic	13
(2)	Surgical	2
(3)	Medical	1
(4)	Throat and nose	2

The Number of Children in Attendance at Hospital Out-Patient Departments or at Clinics

(1)	Orthopaedic cases for treatment or renewal of appliances... ...	46
(2)	Surgical cases for review or investigations	2
(3)	Medical cases for review or investigations	16
(4)	Throat, nose and ear investigations	4
(5)	Ophthalmic	22
(6)	Dermatological	1
(7)	Dental cases for treatment	52
(8)	Chiropody	4

Thirty-three children received B.C.G. vaccinations.

Leavers

Seven of the leavers were of school-leaving age; of the other leavers, 1 was transferred to Lord Mayor Treloar's School, 1 child was transferred to Cheyne Hospital School and 1 child mentioned earlier in the Report, who suffered from a hemiplegia and epilepsy, was withdrawn by her parents.

The new dormitories in the new building have been in use this term; they are smaller, housing 3 to 5 children, but well equipped and appear to be very much appreciated by them.

Oak Bank School, Seal

Dr. K. H. Sugden reports:—

Oak Bank School, Seal, for maladjusted boys (age range 10-16 years) was opened on November 15th, 1962, with a small group of 6 boys.

The term, though short, was constructive, and gave an opportunity for settling in to both boys and staff.

The boys, representing a wide social range, were all physically fit, and remained so throughout the term.

In the Spring Term, 1963, an additional 14 boys from within the County will be admitted, making a total of 20 children in the school.

With increased accommodation which it is hoped to provide in the not too distant future, it is intended to build the school up to a maximum of 50 boys.

SCHOOL MEALS SERVICE AND MILK IN SCHOOLS SCHEME

The County Education Officer reports:

The percentage of children taking school dinners has continued to increase so that, although the total of school rolls in October, 1962, was less than in October, 1961, the number of children taking dinner was greater. The service was handicapped in the early part of the year by the shortage of vegetables and the consequent necessity of using cereals in place of part of the normal allowance of potatoes. New accommodation continues to be brought into use both at new schools and as the result of improvement schemes at existing schools. The carrying-out of minor improvements has been facilitated by the Ministry's ruling that minor building works costing less than £2,000 no longer count against the Authority's Minor Works Allocation but the control, through the Minor Works Allocation, over minor works costing more than £2,000 has been tight. Revised rates of School Meals Premises Grant, reflecting the increases in cost limits of new schools announced in 1961, will apply to all projects at County and controlled schools finally approved on and after 1st March, 1961, which include a new kitchen (or scullery) and dining arrangements approved in accordance with the Standards for School Premises Regulations, 1959.

The position regarding the filling of staff vacancies at all levels becomes increasingly difficult and in some instances a breakdown of the service has been averted only by the strenuous efforts of Area School Meals Organisers, who have been subjected to great strain. In two Divisions, posts of Area School Meals Organiser were vacant throughout the year.

The Milk in Schools Scheme continues to function satisfactorily.

	October 1961	*October 1962*
Number of day pupils in maintained schools on roll	244,549	242,663
Number in attendance on selected day	232,115	230,045
Number of day pupils taking dinner	142,354	144,633
Percentage of roll taking dinner...	58.21	59.6
Percentage of attendance taking dinner ...	61.33	62.87
Number of pupils (including boarders) in maintained schools on roll	245,561	243,724
Number in attendance on selected day... ...	232,978	230,877
Number of pupils taking milk	191,305	189,075
Percentage of roll taking milk	77.91	77.58
Percentage of attendance taking milk	82.11	81.89

PHYSICAL EDUCATION

The County Education Officer reports:—

Of all forms of physical activity with claims for inclusion in the school timetable none receives more sympathetic consideration than swimming. It is one physical exercise which has never, even temporarily, appeared to wane in popularity with the children and which has never been seriously challenged as a reasonable and proper educational activity. It has the advantage of being a sporting pastime with unique and unquestioned utilitarian value, as a means of life-saving. Moreover, its value as a therapeutic exercise for hospital patients, the blind and some physically handicapped children is becoming increasingly recognised.

The amount of swimming instruction taking place as part of the normal education of the children in the Committee's schools has consequently been determined in practice more by the limited facilities available than by any doubts of its relative value in the curriculum.

The Committee are concerned with swimming in all its forms and at all stages: with the first few timid and tentative strokes by the beginner and with the intensive and dedicated training at near-international level of the best school swimmers. It is noteworthy that a Kent boy won the National Schools Free-style Championship this year, and that the winning team in the boys' National Medley Relay competition was also composed of four Kent boys.

The Committee have encouraged the general improvement of standard of swimming by making provision for coaching, awarding proficiency certificates and organising competitions at appropriate levels. Life-saving and survival techniques are taught where possible and diving is encouraged where facilities allow. Even water-polo and synchronised swimming have had fitful popularity.

But there can be no doubt that it is in the teaching of the beginner that the Committee's obligation lies. If, therefore, the facilities available in any area require some limitation to be placed on attendance, preferance is given to this group, which usually comes from upper junior and lower secondary forms. Where there are such limitations any improvement and increase of swimming facilities is most acceptable and greatly welcomed.

It might well be noted in this connection that it was in the corresponding Report of 1959 that the building of learner swimming pools at two primary schools was reported, with an expression of hope that those innovations might start a fashion. It is pleasing to report that more than thirty pools are now in use. This development has been facilitated by the Committee's acceptance of the free-standing prefabricated type, as well as the traditional, reinforced-concrete, permanent pool.

By far the majority of these pools are, in keeping with the Committee's general policy, equipped with chlorination and filtration plant. In cases where, at present, pools are operating without these

mechanised facilities all necessary precautions are taken until such time as they shall be brought up to standard. During the last year alone pools have been brought into use at the following schools:—

Sidcup, Royal Park County Primary School
Northfleet, Lawn County Primary School
Gravesend, Cecil Road County Primary School
,, Westcourt County Primary School
,, Whitehill County Primary School
Frittenden C.E. Primary School
Hawkhurst C.E. Primary School
Underriver C.E. Primary School
Tonbridge, Cage Green County Primary School
Paddock Wood, Mascalls Secondary School
Westerham, Churchill School
Marden County Primary School
High Halstow County Primary School
Sheldwich County Primary School
Sturry Secondary School
Dymchurch County Primary School
Folkestone, George Spurgen County Primary School
Sandwich County Primary School
Foster's Primary School, Bexley

It is efforts like those evidenced in the above list which will make true the old cry, "Every school child a swimmer".

IMMUNISATION AND VACCINATION

B.C.G. Vaccination and the Prevention of Tuberculosis

During 1962, 19,696 schoolchildren aged 13 years and over have been skin tested, 17,340 were found to be negative and 17,311 were vaccinated. All tuberculin positive children were referred to the chest physician concerned for further investigation.

As in former years, precautionary investigations of school children who had been in contact with known cases of pulmonary tuberculosis were continued. 644 children from 8 schools were skin tested, of whom 111 were tuberculin positive and referred to the chest physician. Members of school staffs were given an opportunity of attending for x-ray.

Vaccination Against Poliomyelitis

During the year 5,746 children of up to the age of nineteen years received two injections and 22,945 children received a third injection against poliomyelitis. 16,658 school children under twelve years of age were given a fourth injection. 22,158 children have received completed courses consisting of three doses of oral vaccine.

Diphtheria Immunisation

The County Council arrange for immunisation facilities to be available for children of school age, special sessions being held at the Committee's school clinics, if appropriate, and on school premises. Reinforcing injections are given at appropriate stages throughout the period of school life. The following table shows the extent to which Diphtheria Immunisation has been carried out in the county during the year 1962 :—

	Number of Children between 5 and 15 years
Primary injections	928
Secondary or re-inforcing injections ...	9,682

EMPLOYMENT OF CHILDREN

Arrangements were made for the Assistant County Medical Officers to examine children during the first half hour of each opening of the school clinics and child welfare centres. During the year 3,676 children were examined, and certificates were refused in 35 cases.

CASES OF INFECTIOUS DISEASES NOTIFIED WITHIN THE SCHOOL AGE PERIOD, 5 TO 15 YEARS

	Scarlet Fever		Whooping Cough		Diphtheria		Measles (ex-Rubella)		Acute Pneumonia P. or I.		Poliomyelitis				Acute Poli Enc.		Meningococcal Infection		Dysentery		Tuberculosis				Small Pox		Paratyphoid Fevers		Enteric or Typhoid		Food Poisoning		Erysipelas	
											P.		N.P.								Resp.		Non-Resp.											
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
URBAN DISTRICTS																																		
Ashford	1	1	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Beckenham	2	4	1	3	—	—	56	29	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	1
Bexley	9	3	1	—	—	—	31	32	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Broadstairs	3	—	1	—	—	—	1	3	1	—	—	—	—	—	—	—	—	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Bromley	3	3	—	1	—	—	20	31	2	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—
Chatham	1	4	9	11	—	—	58	44	—	—	—	1	—	—	—	—	—	—	5	5	1	2	—	1	—	—	—	—	—	—	—	—	—	—
Chislehurst	6	7	—	—	—	—	9	14	—	1	—	—	—	—	—	—	—	—	2	2	1	2	—	—	—	—	—	—	—	—	1	1	—	—
Crayford	10	4	—	—	—	—	2	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dartford	2	1	—	—	—	—	—	4	—	1	—	—	—	—	—	—	—	—	3	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Deal	3	1	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dover	2	1	1	2	—	—	100	86	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erith	2	2	—	—	—	—	25	15	—	—	—	—	—	—	—	—	—	—	1	1	1	—	1	—	—	—	—	—	—	—	—	—	—	—
Faversham	3	2	—	—	—	—	10	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Folkestone	5	2	3	—	—	—	12	5	1	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Gillingham	3	8	3	—	—	—	99	81	2	—	—	—	—	—	—	—	—	—	11	9	—	—	—	—	—	—	—	—	—	—	1	—	—	—
Gravesend	—	—	—	—	—	—	74	82	1	—	—	—	—	—	—	—	—	—	—	—	2	1	1	—	—	—	—	—	—	—	—	—	—	—
Herne Bay	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Hythe	2	—	—	—	—	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Lydd	—	—	—	—	—	—	59	56	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Maidstone	15	13	1	1	—	—	34	36	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Margate	6	9	—	1	—	—	4	5	—	—	—	—	—	—	—	—	1	—	2	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—
New Romney	1	1	—	—	—	—	3	1	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Northfleet	—	—	—	1	—	—	32	26	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—
Orpington	10	11	1	—	—	—	79	54	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	6	2	—	—
Penge	3	1	—	2	—	—	4	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Queenborough	2	—	—	—	—	—	2	1	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ramsgate	2	2	1	—	—	—	14	12	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Rochester	3	2	—	—	—	—	29	43	—	—	—	—	—	—	—	—	1	—	1	—	1	2	1	—	—	—	—	—	—	—	—	—	1	—
Sandwich	—	—	—	—	—	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Sevenoaks	20	3	1	—	—	—	4	5	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Sheerness	5	5	—	1	—	—	1	1	—	2	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Sittingbourne	7	1	—	1	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Southborough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Swanscombe	—	—	—	—	—	—	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tenterden	2	—	—	—	—	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tonbridge	1	1	—	1	—	—	4	2	1	—	—	—	—	—	—	—	—	—	—	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tunbridge Wells	—	13	—	1	—	—	9	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—
Whitstable	1	3	—	—	—	—	3	1	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—
RURAL DISTRICTS																																		
Ashford East	—	—	1	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ashford West	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Bridge Blean	1	—	—	—	—	—	28	24	—	1	—	—	1	—	—	—	—	—	1	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—
Cranbrook	2	3	9	6	—	—	34	13	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	10	—	—
Dartford	5	2	1	2	—	—	39	26	—	—	—	—	—	—	—	—	—	—	3	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Dover	1	—	—	—	—	—	15	14	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Eastry	2	1	—	2	—	—	6	9	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—
Elham	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Hollingbourne	—	2	—	—	—	—	9	9	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—
Maidstone	3	—	1	2	—	—	28	22	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—
Malling	6	14	2	1	—	—	3	3	—	—	—	—	1	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—
Romney Marsh	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—
Sevenoaks	5	3	5	3	—	—	7	8	6	4	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Sheppey	—	1	—	—	—	—	2	—	—	1	—	—	—	—	—	—	—	—	9	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Strood	3	2	1	—	—	—	43	36	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—
Swale	3	4	—	—	—	—	9	13	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—
Tenterden	1	1	—	—	—	—	3	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tonbridge	2	3	1	2	—	—	3	3	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS	169	144	46	47	—	—	1,021	868	19	11	1	3	2	—	1	—	3	1	49	40	15	12	7	4	—	—	—	1	—	—	11	14	1	1

TABLE I (A)

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED and ASSISTED PRIMARY and SECONDARY (Including Nursery and Special) SCHOOLS

Physical Condition of Pupils Inspected

Age Groups Inspected (By years of birth)	Number of Pupils Inspected						Satisfactory												Unsatisfactory											
							No.						% of Col. (2)						No.						% of Col (2)					
	"Excepted" District of Beckenham	Bexley ,, ,,	Bromley ,, ,,	Gillingham ,, ,,	Remainder of Area	TOTAL	"Excepted" District of Beckenham	Bexley ,, ,,	Bromley ,, ,,	Gillingham ,, ,,	Remainder of Area	TOTAL	"Excepted" District of Beckenham	Bexley ,, ,,	Bromley ,, ,,	Gillingham ,, ,,	Remainder of Area	TOTAL	"Excepted" District of Beckenham	Bexley ,, ,,	Bromley ,, ,,	Gillingham ,, ,,	Remainder of Area	TOTAL	"Excepted" District of Beckenham	Bexley ,, ,,	Bromley ,, ,,	Gillingham ,, ,,	Remainder of Area	TOTAL
(1)	(2)						(3)						(4)						(5)						(6)					
1958 and later	24	13	—	9	393	439	24	13	—	9	389	435	100.0	100.0	—	100.0	99.0	99.1	—	—	—	—	4	4	—	—	—	—	1.0	0.9
1957	657	459	39	923	24,823	26,901	656	459	38	897	24,588	26,638	99.8	100.0	97.4	97.2	99.0	99.0	1	—	1	26	235	263	0.2	—	2.6	2.8	1.0	1.0
1956	136	504	648	986	6,092	8,366	136	504	640	958	6,023	8,261	100.0	100.0	98.8	97.2	98.8	98.7	—	—	8	28	69	105	—	—	1.2	2.8	1.2	1.3
1955	614	241	46	129	1,768	2,798	614	241	46	127	1,750	2,778	100.0	100.0	100.0	98.4	98.9	99.3	—	—	—	2	18	20	—	—	—	1.5	1.1	0.7
1954	61	522	558	401	11,371	12,913	61	521	551	389	11,197	12,719	100.0	99.8	98.7	97.0	98.5	98.5	—	1	7	12	174	194	—	0.2	1.3	3.0	1.5	1.5
1953	627	491	244	203	5,308	6,873	627	491	240	198	5,272	6,828	100.0	100.0	98.4	97.5	99.3	99.3	—	—	4	5	36	45	—	—	1.6	2.5	0.7	0.7
1952	58	192	531	17	620	1,418	58	192	518	17	615	1,400	100.0	100.0	97.6	100.0	99.2	98.7	—	—	13	—	5	18	—	—	2.4	—	0.8	1.3
1951	402	565	530	625	19,346	21,468	402	564	522	608	19,096	21,192	100.0	99.8	98.5	97.3	98.7	98.7	—	1	8	17	250	276	—	0.2	1.5	2.7	1.3	1.3
1950	91	918	136	839	8,494	10,478	91	916	130	804	8,460	10,401	100.0	99.8	95.6	95.8	99.6	99.3	—	2	6	35	34	77	—	0.2	4.4	4.2	0.4	0.7
1949	397	334	38	287	934	1,990	397	334	35	276	922	1,964	100.0	100.0	92.1	96.2	98.7	98.7	—	—	3	11	12	26	—	—	7.9	3.8	1.3	1.3
1948	49	144	789	21	10,078	11,081	49	144	769	21	10,031	11,014	100.0	100.0	97.5	100.0	99.5	99.4	—	—	20	—	47	67	—	—	2.5	—	0.5	0.6
1947 and earlier.. ..	871	1,564	1,188	355	9,876	13,854	871	1,563	1,176	352	9,732	13,694	100.0	99.9	99.0	99.2	98.5	98.8	—	1	12	3	144	160	—	0.1	1.0	0.8	1.5	1.2
TOTAL	3,987	5,947	4,747	4,795	99,103	118,579	3,986	5,942	4,665	4,656	98,075	117,324	99.9	99.9	98.3	97.1	99.0	98.9	1	5	82	139	1,028	1,255	0.1	0.1	1.7	2.9	1.0	1.1

TABLE I (B)

PUPILS FOUND TO REQUIRE TREATMENT.

Number of Individual Pupils found at Periodic Medical Inspection to require Treatment (excluding Dental Diseases and Infestation with Vermin).

Age Groups Inspected (by year of birth) (1)	For defective vision (excluding squint) (2)						For any of the other conditions recorded in Table II (A) (3)						Total individual pupils (4)					
	"Excepted" District of Beckenham	Bexley	Bromley	Gillingham	Remainder of Area	Total	"Excepted" District of Beckenham	Bexley	Bromley	Gillingham	Remainder of Area	Total	"Excepted" District of Beckenham	Bexley	Bromley	Gillingham	Remainder of Area	Total
1958 and later	—	—	—	—	7	7	—	1	—	1	36	38	—	1	—	1	40	42
1957	7	25	1	21	521	575	25	63	2	202	2,431	2,723	32	78	3	211	2,825	3,149
1956	3	48	27	33	293	404	7	71	46	188	538	850	10	94	73	193	870	1,240
1955	25	11	3	7	148	194	23	26	4	18	223	294	47	34	7	19	358	465
1954	4	59	26	30	847	966	2	68	22	53	1,030	1,175	6	110	48	57	1,796	2,017
1953	13	62	9	4	459	557	17	64	13	11	440	545	29	120	22	12	858	1,041
1952	2	20	10	—	74	106	2	29	17	—	64	112	4	46	27	—	132	209
1951	16	69	30	83	1,230	1,438	14	77	18	96	2,874	3,079	30	121	48	140	3,955	4,294
1950	3	159	9	87	728	986	4	149	4	112	1,273	1,542	7	255	13	170	1,920	2,365
1949	16	54	7	20	142	239	6	54	2	36	198	296	20	62	9	50	236	377
1948	2	42	20	1	977	1,042	—	47	38	2	958	1,045	2	73	58	2	1,883	2,018
1947 and earlier	43	279	30	61	1,395	1,808	14	235	18	44	816	1,127	57	443	48	83	2,126	2,757
TOTAL	134	828	172	347	6,821	8,322	114	884	184	763	10,881	12,826	244	1,437	356	938	16,999	19,994

TABLE I (C)

Other Inspections	"Excepted" District of Beckenham	Bexley ,, ,,	Bromley ,, ,,	Gillingham ,, ,,	Remainder of Area	TOTAL
Number of Special Inspections	229	1,676	830	215	3,364	6,314
Number of Re-inspections	95	1,847	829	401	24,418	27,590
TOTAL	324	3,523	1,659	616	27,782	33,904

TABLE I (D)

INFESTATION WITH VERMIN

	"Excepted" District of Beckenham	Bexley ,, ,,	Bromley ,, ,,	Gillingham ,, ,,	Remainder of Area	TOTAL
(i) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons	2,770	2,285	8,374	9,431	204,051	226,911
(ii) Total number of *individual* pupils found to be infested	—	12	67	103	1,444	1,626
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	—	—	—	—	252	252
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	—	—	—	—	—	—

TABLE II (A)

DEFECTS FOUND AT PERIODIC MEDICAL INSPECTIONS

NOTE.—All defects noted at medical inspection as requiring treatment are included in this return, *whether or not this treatment was begun before the date of the inspection*

Defect Code No. (1)	Defect or Disease (2)	ENTRANTS												LEAVERS												OTHERS												TOTAL (including all other age groups inspected)											
		Requiring treatment (3)						Requiring Observation (4)						Requiring treatment (5)						Requiring Observation (6)						Requiring Treatment (7)						Requiring Observation (8)						Requiring Treatment (7)						Requiring Observation (8)					
		"Excepted" District of Beckenham	Bexley ,,	Bromley ,,	Gillingham ,,	Remainder of Area	TOTAL	"Excepted" District of Beckenham	Bexley ,,	Bromley ,,	Gillingham ,,	Remainder of Area	TOTAL	"Excepted" District of Beckenham	Bexley ,,	Bromley ,,	Gillingham ,,	Remainder of Area	TOTAL	"Excepted" District of Beckenham	Bexley ,,	Bromley ,,	Gillingham ,,	Remainder of Area	TOTAL	"Excepted" District of Beckenham	Bexley ,,	Bromley ,,	Gillingham ,,	Remainder of Area	TOTAL	"Excepted" District of Beckenham	Bexley ,,	Bromley ,,	Gillingham ,,	Remainder of Area	TOTAL	"Excepted" District of Beckenham	Bexley ,,	Bromley ,,	Gillingham ,,	Remainder of Area	TOTAL	"Excepted" District of Beckenham	Bexley ,,	Bromley ,,	Gillingham ,,	Remainder of Area	TOTAL
4	Skin	—	21	3	34	190	248	14	40	1	11	136	202	1	101	3	6	407	518	10	89	—	—	170	269	1	109	8	26	548	692	40	130	1	6	269	446	2	231	14	66	1145	1458	64	259	2	17	575	917
5	Eyes—a. Vision	10	68	30	61	821	990	61	74	194	96	927	1352	43	254	42	62	2372	2773	60	69	80	6	499	714	81	412	100	224	3828	4645	226	186	179	70	939	1600	134	734	172	347	6821	8408	347	329	453	172	2365	3666
	b. Squint	1	16	3	53	341	414	7	11	3	17	69	107	—	8	—	1	107	116	1	10	—	—	20	31	1	44	2	10	485	542	3	39	1	5	69	117	2	68	5	64	933	1072	11	60	4	22	158	255
	c. Other	1	5	1	9	54	70	2	7	2	3	24	38	—	25	3	1	60	89	—	30	4	—	121	155	3	64	5	17	125	214	8	48	3	2	115	176	4	94	9	27	239	373	10	85	9	5	260	369
6	Ears—a. Hearing	6	6	—	23	106	141	9	78	23	67	436	613	—	5	1	—	57	63	2	34	7	—	111	154	5	15	—	14	161	195	25	126	40	31	409	631	11	26	1	37	324	399	36	238	70	98	956	1418
	v. Otitis Media	—	5	3	5	62	75	6	23	1	4	165	199	—	2	—	—	40	42	—	20	—	—	41	61	—	4	—	2	109	115	10	46	—	2	134	192	—	11	3	7	211	232	16	89	1	6	340	452
	c. Other	—	11	—	—	15	26	—	18	—	—	8	26	—	17	—	—	19	36	2	9	—	—	5	16	—	67	2	2	56	127	5	41	4	—	25	75	—	95	2	2	90	189	7	68	4	—	38	117
7	Nose and Throat	3	25	4	123	362	517	21	234	15	72	801	1143	—	14	—	10	226	250	5	76	2	—	118	201	3	35	4	31	415	488	31	360	7	22	562	982	6	74	8	164	1003	1255	57	670	24	94	1481	2326
8	Speech	4	8	13	22	153	200	9	38	5	35	304	391	—	1	3	—	14	18	1	16	—	—	31	48	7	9	14	4	197	231	9	63	3	9	168	252	11	18	30	26	364	449	19	117	8	44	503	691
9	Lymphatic Glands	1	3	—	1	11	16	3	152	—	3	228	386	—	—	—	—	11	11	—	38	—	—	29	67	1	3	—	1	9	14	3	258	—	1	139	401	2	6	—	2	31	41	6	448	—	4	396	854
10	Heart	1	2	—	13	23	39	11	12	2	15	118	158	—	1	—	1	14	16	3	25	1	—	75	104	1	3	—	7	36	47	22	59	7	22	165	275	2	6	—	21	73	102	36	96	10	37	358	537
11	Lungs	1	6	5	19	131	162	7	63	2	7	243	322	—	10	—	—	60	70	3	68	1	—	100	172	2	14	2	17	165	200	22	150	5	14	335	526	3	30	7	36	356	432	32	281	8	21	678	1020
12	Developmental—																																															
	a. Hernia	—	1	—	8	77	86	—	8	1	9	36	54	—	—	—	—	8	8	1	4	2	—	10	17	—	3	5	4	44	56	4	15	3	5	38	65	—	4	5	12	129	150	5	27	6	14	84	136
	b. Other	—	1	3	2	55	61	2	40	8	21	256	327	—	3	2	—	57	62	2	15	17	—	34	68	1	12	4	4	171	192	9	95	55	59	339	557	1	16	9	6	283	315	13	150	80	80	629	952
13	Orthopaedic—																																															
	a. Posture	4	2	—	3	10	19	5	17	6	8	58	94	1	15	7	—	108	131	3	51	86	—	151	291	3	50	17	2	148	220	12	134	118	19	241	524	8	67	24	5	266	370	20	202	210	27	450	909
	b. Feet	5	13	5	74	125	222	9	69	10	13	310	411	2	11	2	21	160	196	1	63	6	—	221	291	23	53	19	143	380	618	13	185	26	22	435	681	30	77	26	238	665	1036	23	317	42	35	966	1383
	c. Other	2	7	2	3	115	129	7	65	—	8	213	293	1	16	5	3	87	112	2	181	3	2	115	303	12	47	6	22	211	298	27	280	10	11	241	569	15	70	13	28	413	539	36	526	13	21	569	1165
14	Nervous System—																																															
	a. Epilepsy	1	—	1	2	29	33	2	5	—	—	21	28	—	2	—	—	37	39	3	4	1	—	10	18	2	4	1	4	52	63	5	7	—	5	39	56	3	6	2	6	118	135	10	16	1	5	70	102
	b. Other	—	—	—	5	10	15	3	7	—	4	33	47	—	4	—	—	18	22	3	10	2	—	22	37	1	1	—	2	21	25	4	1 3	7	3	68	95	1	5	—	7	49	62	10	30	9	7	123	179
15	Psychological—																																															
	a. Development	2	—	—	1	17	20	5	16	—	4	102	127	—	—	—	—	22	22	—	15	—	—	38	53	—	—	—	—	73	73	7	69	3	13	215	307	2	—	—	1	112	115	12	100	3	17	355	487
	b. Stability	—	—	1	1	34	36	3	76	1	13	369	462	—	1	—	1	31	33	1	40	1	1	107	150	1	5	1	5	111	123	2	251	8	13	524	798	1	6	2	7	176	192	6	367	10	27	1000	1410
16	Abdomen	1	3	—	6	37	47	1	18	3	4	39	65	—	1	—	2	72	75	4	17	2	—	38	61	—	3	—	7	89	99	17	79	3	4	98	201	1	7	—	15	198	221	22	114	8	8	175	327
17	Other	2	5	14	2	48	71	9	34	12	4	115	174	—	23	7	—	73	103	3	100	19	—	93	215	1	33	12	2	141	189	15	178	43	2	209	447	3	61	33	4	262	363	27	312	74	6	417	836
	Totals	45	208	88	470	2826	3637	196	1105	289	418	5011	7019	48	514	75	108	4060	4805	110	984	234	9	2159	3495	149	990	202	550	7375	9466	519	2812	526	340	5776	9973	242	1712	365	1128	14261	17908	825	4901	1049	767	12946	20498

TABLE II (B)

DEFECTS FOUND AT SPECIAL INSPECTIONS

NOTE.—All defects noted at medical inspection as requiring treatment are included in this return, *whether or not this treatment was begun before the date of the inspection.*

Defect Code No. (1)	Defect or Disease (2)	Requiring Treatment (3)						Requiring Observation (4)					
		"Excepted" District of Beckenham	Bexley " "	Bromley " "	Gillingham " "	Remainder of Area	TOTAL	"Excepted" District of Beckenham	Bexley " "	Bromley " "	Gillingham " "	Remainder of Area	TOTAL
4	Skin	1	45	6	48	779	879	1	7	3	2	52	65
5	Eyes—												
	(*a*) Vision ..	9	44	103	19	603	778	15	17	64	16	85	197
	(*b*) Squint ..	—	2	3	—	37	42	2	—	—	—	7	9
	(*c*) Other ..	2	4	3	32	52	93	3	13	3	1	15	35
6	Ears—												
	(*a*) Hearing ..	3	36	7	1	166	213	73	101	21	4	67	266
	(*b*) Otitis Media	—	3	1	5	25	34	—	7	—	—	3	10
	(*c*) Other ..	—	4	2	7	39	52	1	1	—	1	10	13
7	Nose and Throat	—	45	10	—	78	133	5	23	5	—	37	70
8	Speech	13	13	16	4	99	145	1	11	2	1	18	33
9	Lymphatic Glands.. ..	—	—	—	—	2	2	1	3	—	—	5	9
10	Heart	—	6	2	—	6	14	11	26	—	1	5	43
11	Lungs	5	11	2	—	19	37	8	44	3	4	27	86
12	Developmental—												
	(*a*) Hernia ..	—	6	—	—	2	8	—	1	3	—	—	4
	(*b*) Other ..	1	4	10	1	13	29	3	25	35	—	12	75
13	Orthopaedic—												
	(*a*) Posture ..	4	—	9	—	29	42	2	4	49	—	12	67
	(*b*) Feet ..	7	20	16	—	96	139	6	5	9	—	25	45
	(*c*) Other ..	—	2	13	—	41	56	1	32	—	1	12	46
14	Nervous system—												
	(*a*) Epilepsy ..	—	—	—	—	11	11	—	4	2	—	4	10
	(*b*) Other ..	—	3	—	—	14	17	1	5	4	1	10	21
15	Psychological—												
	(*a*) Development	—	34	1	—	90	125	9	73	3	1	27	113
	(*b*) Stability ..	1	46	8	1	129	185	1	74	4	1	108	188
16	Abdomen ..	—	7	—	—	68	75	—	16	1	—	26	43
17	Other	2	70	32	160	958	1,222	13	78	22	23	197	333
	Total ..	48	405	244	278	3,356	4,331	157	570	233	57	764	1,781

TABLE III

TREATMENT OF PUPILS

EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases treated					
	"Excepted" Districts of				Remainder of Area	TOTAL
	Beckenham	Bexley	Bromley	Gillingham		
External and other, excluding errors of refraction and squint	201	94	230	128	332	985
Errors of Refraction (including squint) ..	648	1,650	1,405	1,314	14,158	19,175
Total	849	1,744	1,635	1,442	14,490	20,160
Number of pupils for whom spectacles were prescribed	245	718	850	235	6,357	8,405

ORTHOPAEDIC AND POSTURAL DEFECTS

(*a*) Pupils treated at clinics or out-patients' departments	45	229	248	—	1,260	1,782
(*b*) Pupils treated at schools for postural defects	4	—	3	—	935	942
Total	49	229	251	—	2,195	2,724

DISEASES OF THE SKIN (excluding uncleanliness, for which see Table I(D))

Ringworm— (i) Scalp	—	—	—	—	1	1
(ii) Body	—	—	1	1	—	2
Scabies	—	1	—	3	4	8
Impetigo..	1	1	—	17	44	63
Other skin diseases	519	58	214	22	762	1,575
Total ..	520	60	215	43	811	1,649

OTHER TREATMENT GIVEN

Pupils with minor ailments ..	387	479	376	304	2,684	4,230

CHILD GUIDANCE TREATMENT

Number of pupils treated at Child Guidance Clinics under arrangements made by the Authority	1,815

SPEECH THERAPY

Number of pupils treated by Speech Therapists under arrangements made by the Authority	2,747

TABLE IV

DENTAL INSPECTION AND TREATMENT

	"Excepted" District of Beckenham	Bexley " "	Bromley " "	Gillingham " "	Remainder of Area	TOTAL
(1) Number of pupils inspected by the Authority's Dental Officers—						
(*a*) At Periodic Inspections ...	7,618	9,564	10,619	10,085	118,076	155,962
(*b*) As Specials	55	617	2,624	492	5,752	9,540
Total (1) ...	7,673	10,181	13,243	10,577	123,828	165,502
(2) Number found to require treatment	3,377	5,735	5,241	5,830	73,423	93,606
(3) Number offered treatment	2,430	4,756	3,831	5,621	63,338	79,976
(4) Number actually treated	474	1,565	2,096	1,375	23,252	28,762
(5) Number of attendances, made by pupils for treatment, including those recorded at heading 11(h) below	2,605	6,422	6,287	4,529	95,458	115,301
(6) Half-days devoted to—						
Periodic (School) Inspection ...	50	51	69	52	967	1,189
Treatment	520	951	790	544	12,820	15,625
Total (6) ...	570	1,002	859	596	13,787	16,814
(7) Fillings—						
Permanent Teeth	1,319	3,896	4,877	2,287	49,522	61,901
Temporary Teeth	515	950	900	1,565	13,010	16,940
Total (7) ...	1,834	4,846	5,777	3,852	62,532	78,841
(8) Number of Teeth Filled—						
Permanent Teeth	1,204	3,337	3,052	1,933	44,491	54,017
Temporary Teeth	488	833	845	1,439	12,068	15,673
Total (8) ...	1,692	4,170	3,897	3,372	56,559	69,690
(9) Extractions—						
Permanent Teeth	68	252	302	291	6,849	7,762
Temporary Teeth	174	970	1,193	1,388	18,027	21,752
Total (9) ...	242	1,222	1,495	1,679	24,876	29,514
(10) Administration of general anaesthetics for extraction	71	477	694	932	7,220	9,394
(11) Orthodontics—						
(*a*) Cases commenced during the year...	13	22	92	41	424	592
(*b*) Cases carried forward from previous year	10	86	22	22	862	1,002
(*c*) Cases completed during the year...	2	14	56	8	271	351
(*d*) Cases discontinued during the year...	6	20	4	29	260	319
(*e*) Pupils treated with appliances	19	28	47	5	909	1,008
(*f*) Removable appliances fitted	26	31	54	4	963	1,678
(*g*) Fixed appliances fitted ...	3	—	1	—	85	89
(*h*) Total attendances	218	392	878	125	9,488	11,101
(12) Number of pupils supplied with artificial teeth	2	8	23	10	306	349
(13) Other operations—						
Permanent Teeth	684	2,070	1,088	68	16,049	19,959
Temporary Teeth	210	1,234	516	—	9,864	11,824
Total (13) ...	894	3,304	1,604	68	25,913	31,783

TABLE V

HANDICAPPED PUPILS

Handicapped Pupils Requiring Education at Special Schools or Boarding in Boarding Homes

During the calendar year ended 31st December, 1962 No. of handicapped pupils who—	(1) Blind (2) Partially sighted		(3) Deaf (4) Partially Hearing		(5) Physically Handicapped (6) Delicate		(7) Maladjusted (8) Educationally subnormal		(9) Epileptic (10) Speech Defects		Total (1)-(10)
A. were newly assessed as needing special educational treatment at special schools or in boarding homes ...	(1) 7	(2) 13	(3) 8	(4) 4	(5) 22	(6) 210	(7) 130	(8) 279	(9) 8	(10) 6	(11) 687
B. (i) of these included at A. were newly placed in special schools or boarding homes ...	1	4	6	2	6	116	38	111	6	—	290
(ii) of those assessed prior to 1st January 1962, were newly placed in special schools or boarding homes	5	3	3	7	15	68	44	152	1	—	299
Total (B) ...	6	7	9	9	21	184	82	264	7	—	589
On or about 20th January, 1963, number of handicapped pupils who C. were requiring places in special schools											
(*a*) day	—	—	—	4	4	6	3	297	—	—	314
(*b*) boarding ...	6	9	2	—	20	125	87	199	—	11	459
D. (i) were on the registers of											
(1) maintained special schools as											
(*a*) day pupils ...	—	26	11	46*	43	92	7	569	—	—	794
(*b*) boarding pupils	2	2	14	4	83	158	35	350	—	—	648
(2) non-maintained special schools as ...											
(*a*) day pupils ...	4	—	7	—	8	—	—	—	—	—	19
(*b*) boarding pupils ...	47	14	57	18	33	59	56	59	21	—	364
(ii) were on the registers of independent schools under arrangements made by the authority ...	—	1	11	11	21	10	141	53	—	—	248
(iii) were boarded in homes and not already included under (i) or (ii) ...	—	—	—	—	—	9	11	—	—	—	20
Total (D) ...	53	43	100	79	188	328	250	1,031	21	—	2,093
E. were being educated under arrangements made under Section 56 of the Education Act, 1944											
(i) in hospitals ...	—	—	—	—	58	—	—	—	—	—	58
(ii) in other groups (e.g., units for spastics, convalescent homes)	—	—	—	—	39	17	45	3	—	—	92
(iii) at home	1	—	1	1	55	13	12	31	—	3	117

F. Number of children who during the year ended 31st December, 1961, were the subjects of	
(i) new decisions recorded under Section 57(4) of the Education Act, 1944	68
(ii) reviews carried out under Section 57A of the Education Act, 1944	14
(iii) decisions cancelled under Section 57A(2) of the Education Act, 1944	6

* Includes Gillingham and Dartford Partially Deaf Units.

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